

06/24/2003

# UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.: S-100,593

First Inventor or Application Identifier: Torsten A. Staab

Title: HANDHELD APPARATUS FOR AUTOMATED MULTIPURPOSE SAMPLE  
COLLECTION AND REGISTRATION

Express Mail Label No.: ER311841398US

## APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents  
Mail Stop Patent Application  
PO Box 1450  
Alexandria, VA 22313-1450

1. ☒ \* Fee Transmittal Form (e.g. PTO/SB/17)  
(submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages: 16 ]  
☒ Descriptive title of the Invention  
☐ Cross References to Related Applications  
☒ Statement Regarding Fed sponsored R&D  
☐ Reference to sequence listing, a table  
or a computer program listing appendix  
☒ Background of the Invention  
☒ Brief Description of the Drawings (if filed)  
☒ Detailed Description  
☒ Claim(s)  
☒ Abstract of the Disclosure
4. ☒ Drawings(s) (35 U.S.C. 113) [Total Sheets: 6 ]  
☒ Formal ☐ Informal
5. ☒ Declaration & Power of Attorney  
[Total Pages: 2 ]  
a. ☒ Newly executed (original or copy)  
b. ☐ Copy from a prior application (37 C.F.R. § 63(d)  
(for continuation/divisional with Box 16 completed)  
c. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b).

6. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)  
a. ☐ Computer Readable Copy  
b. Specification Sequence Listing on:  
i. ☐ CD-ROM or CD-R (2 copies): or  
ii. ☐ paper  
c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

8. ☒ Assignment Papers (cover sheet & documentation)
9. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
10. ☒ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(should be specifically itemized)
13. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
14. ☐ Nonpublication Request and Certification Under 35 U.S.C.  
122(b)(2)(b)(i)
15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application S.N. S-100,593.

Prior application information: Examiner: Group/Art Unit:

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 16. CORRESPONDENCE ADDRESS

☒ Customer Number 35068OR ☐ Correspondence Address Below**35068**

(Insert Customer No. or Attach Bar Code Label here)

Name: Mark N. Fitzgerald  
Address: Los Alamos National Laboratory, LC/IP, MS A187  
City: Los Alamos State: New Mexico Zip Code: 87545  
Country: Unit d States Telephone: (505) 665-5187 Fax: (505) 665-4424

Name: Mark N. Fitzgerald

Registration No.: 48,300

Signature: 

Date: 11/24/03

22154 U.S. PTO  
10/720955

# FEE TRANSMITTAL For FY 2004

Patent fees are subject to annual revision  
(submit an original and a duplicate for fee processing)

## Complete if Known

Application Number:  
Filing Date:  
First Named Inventor: Torsten A. Staab  
Examiner Name:  
Group/Art Unit:  
Attorney Docket No.: S-100,593

### METHOD OF PAYMENT

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:  
Deposit Account Number: 12-2150  
Deposit Account Name: Los Alamos National Laboratory  
☒ Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17  
☒ Applicant claims small entity status.  
See 37 CFR 1.27

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$770	\$385	Utility filing fee	385.00
\$770	\$385	Reissue filing fee	
\$160	\$80	Provisional filing fee	

**SUBTOTAL (1) \$385.00**

#### 2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent Claims	Extra Claims	Fee from Fee Paid Below	Fee Paid
24	3		4	9	36.00
			0	0	0

\*\* or number previously paid, if greater; For Reissues, see below

Large Entity Fee	Small Entity Fee	Fee Description
\$18	\$9	Claims in excess of 20
\$86	\$43	Independent claims in excess of 3
\$290	\$145	Multiple dependent claim, if not paid.
\$86	\$43	** Reissue independent claims over original patent
\$18	\$9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) \$36**

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$130	\$65	Surcharge - late filing fee or oath	
\$50	\$25	Surcharge - late provisional filing fee or cover sheet	
\$2,520	\$2,520	For filing a request for reexamination	
\$110	\$55	Extension for reply within first month	
\$420	\$210	Extension for reply within second month	
\$950	\$475	Extension for reply within third month	
\$1,480	\$740	Extension for reply within fourth month	
\$2,010	\$1,005	Extension for reply within fifth month	
\$330	\$165	Notice of Appeal	
\$330	\$165	Filing a brief in support of an appeal	
\$290	\$145	Request for oral hearing	
\$110	\$55	Petition to revive - unavoidable	
\$110	\$55	Terminal Disclaimer	
\$1,330	\$665	Petition to revive - unintentional	
\$130	\$130	Petitions to the Commissioner	
\$50	\$50	Petitions related to provisional applications	
\$180	\$180	Submission of Information Disclosure Statement	
\$770	\$385	Filing a submission after final rejection (37 CFR 1.129 (a))	
\$770	\$385	For each additional invention to be examined (37 CFR 1.129(b))	
\$100	\$100	Certificate of Correction	
\$300	\$300	Publication fee for early, voluntary, or normal publication	
\$770	\$385	Request for Continued Examination (RCE)	

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3) \$0**

Reduced by Basic Filing Fee Paid

**SUBTOTAL FROM 1 \$385**  
**SUBTOTAL FROM 2 \$36**  
**SUBTOTAL FROM 3 \$0**  
**TOTAL AMOUNT OF PAYMENT \$421**

### SUBMITTED BY

### Complete (if applicable)

Printed Name: Mark N. Fitzgerald

Reg. No. 48,300

Signature: 

Date: 11/24/03

Telephone (505) 665-5187